



IDAHO ADOPT-A-HIGHWAY OPERATION WILDFLOWER APPLICATION



PLEASE TYPE OR PRINT

Application Year _____

Adopt-A-Highway Volunteer Group _____

Contact Person _____

Address _____

City

State

Zip

Day Phone _____

Number of Miles Adopted _____

Route # _____ Beginning Mile Post _____ Ending Mile Post _____

DISTRICT USE ONLY

☐ APPROVED

☐ NOT APPROVED

[illegible]